

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, California 95814



ADULT & SENIOR CARE UPDATE

December 2007

This is the fourth and final issue of the Adult and Senior Care Update for 2007. We appreciate your support in sharing these updates with members of your organization and others interested in adult and senior care issues. Best wishes to all for a Happy Holiday season and New Year!

CCLD WEBPAGE HAS CHANGED

While the address for the Community Care Licensing Division (CCLD) webpage remains the same, www.cclld.ca.gov, the webpage has been updated to allow for easier navigation. Under the California Department of Social Services (CDSS) title, there are several new tabs, CCL Home, Laws & Regulations, Fingerprinting, Complaints, Facility Facts, Forms, and Tools & Resources. Each of these tabs includes a drop down menu of more specific services or information. Please take a few minutes to visit and browse the new CCLD webpage.

NEW SSI/SSP AND NON-MEDICAL RATES FOR 2008

New Supplemental Security Income (SSI)/State Supplementary Payment (SSP) rates become effective January 1, 2008. The new rates reflect a 2.30% federal cost of living increase to the SSI portion of the benefit. A chart showing the new payment standards is attached. A second chart showing the new non-medical out-of-home care rate increases is also attached. An increase in the combined SSI/SSP rate by the State of California, which will result in a total 3.70% cost of living increase in the 2007 SSI/SSP rate, has been suspended through May, but is slated to become effective June 1, 2008. Look to future releases of the *Adult and Senior Care Update* for information regarding June 2008 increases. If you have questions regarding these new rates, please contact John Mason of the Adult Programs Operations Bureau at (916) 229-4008.

CHAPTERED LEGISLATION FOR 2007

A summary and implementation plan for each bill that affects adult and senior care facilities will be available on the CCLD website. Unless otherwise noted, these bills become effective on January 1, 2008. Licensees are encouraged to review these plans to ensure compliance with the provisions of these bills. The implementation plans for Residential Care Facilities for the Elderly, Adult Community Care Facilities and

Residential Care Facilities for the Chronically Ill will be online in the near future at <http://ccl.dss.cahwnet.gov/PG830.htm>

NOW AVAILABLE ON CCLD WEBSITE: CCLD INFORMATION RELEASE 2007-10 MEDICATION TRAINING FOR DIRECT CARE STAFF

CCL Information Release 2007-10 Medication Training for Direct Care Staff is now available on the CCLD website at: <http://www.cclld.ca.gov/res/pdf/200710.pdf>.

The purpose of this CCL Information Release is to provide further clarification on the requirements of H&S Code Section 1569.69. The statutory requirements of H&S Code Section 1569.69 become effective January 1, 2008, and affect all Residential Care Facilities for the Elderly (RCFEs). To assist licensees in meeting the requirements of H&S Code 1569.69, the following attachments are included with this Information Release:

- Attachment I: Sample – Six-bed Licensee Plan of Operation Addendum
- Attachment II: Sample – CCL Review and Response Letter to Licensee
- Attachment III: Frequently Asked Questions, including a Table of Contents
- Attachment IV: Medication Training for Direct Care Staff – Requirements Matrix

For additional information, please contact Debbie Fox at (916) 322-3178.

HOW TO HANDLE SITUATIONS WHEN CLIENTS/RESIDENTS RECEIVE REDUCED SSI BENEFIT PAYMENTS

The Social Security Administration (SSA) provides several options that may resolve issues related to clients/residents having their SSI benefits reduced due to previous SSI overpayments.

Option I: The SSI recipient/resident can complete an SSA Form 632 (Waiver of Overpayment Recovery or Change in Repayment Rate). The SSA may grant a waiver when the recipient is without fault and, (a) the recovery or adjustment would defeat the purpose of the program involved, or (b) would be against equity and good conscience, or (c) for the SSI program only, would impede efficient or effective administration of the program because of the small amount involved.

Option II. The second option of relief would be if the SSA accepts a Compromise Settlement of an Overpayment. A compromise settlement occurs when the SSA accepts an amount less than the full overpayment and forgives repayment of the rest of the debt. The Federal Claims Collection Act of 1966 permits federal agencies to arrange compromise settlements of overpayment claims.

Generally, the SSA can accept a compromise when one of the following conditions exists:

- The debtor is unable to pay the full amount within a reasonable time;
- The government is unable to enforce collection of the full amount within a reasonable time;
- The government is unable to obtain full recovery through court action because of the legal issues involved or there is a legitimate dispute as to the facts; or

- The cost of collecting the claim is likely to exceed the amount to be recovered.

The CCLD Audit Section is available to assist licensees in accessing the SSA forms and materials related to this process. For more information, contact Ron Domingos, CCLD Audit Section, at (916) 274-1011.

For SSA Waiver information, refer to the following website:

http://www.ssa.gov/OP_Home/handbook/handbook.19/handbook-1914.html

For the SSA Waiver form and related information, refer to the following website:

<http://www.ssa.gov/online/ssa-632.html>

For SSA information regarding a Compromise Settlement of an Overpayment, refer to the following website: http://www.ssa.gov/OP_Home/handbook/handbook.19/handbook-1911.html

EARNED INCOME TAX CREDIT: NEW LAW FOR EMPLOYERS IN 2008

Effective January 1, 2008, Assembly Bill (AB) 650, Chapter 606 (Lieu and Jones), requires employers who are required to provide unemployment insurance to notify their employees that they may be eligible for the federal Earned Income Tax Credit (EITC). AB 650 requires employers to give notification to employees within one week before or after the *Wage and Tax Statement* (Form W-2) or *Miscellaneous Income* (Form 1099) form is given. This new law also requires employers to process the IRS Form W-5 for advance payments of the EITC if requested by the employee. For additional information, refer to www.edd.ca.gov. If you have any questions, please call the Taxpayer Assistance Center at (888) 745-3886.

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH ISSUES 2007-08 INFLUENZA RECOMMENDATIONS

In October 2007, the California Department of Public Health (CDPH) issued its Recommendations for the Prevention, Detection, and Control of Influenza in California Long-term Care Facilities, 2007-08. Licensees and providers are encouraged to review this document, which is comprehensive and easy to understand. In addition, a shortened version of the recommendations has been adapted as an aid for licensees and staff of residential community care facilities. Both documents are available on the CCLD web site at <http://www.cclld.ca.gov/PG523.htm>. The full text of the CDPH recommendations is available at <http://www.dhs.ca.gov/ps/dcdc/disb/disbindex.htm>. In addition, the Centers for Disease Control have posted information at <http://www.cdc.gov/flu/>.

WINTER WEATHER HEALTH TIPS

Though most of California experiences relatively mild winters, there always exists the potential for freezing weather. The elderly and medically fragile are particularly susceptible to the cold. Persons with poor circulation, or who take medications that can interfere with the body's ability to regulate temperature, are at risk for hypothermia. For more information on being prepared for the winter season, visit <http://ccl.dss.cahwnet.gov/res/pdf/WinterWeather.pdf>.

MRSA/STAPH INFECTIONS

Recently there has been a great deal of publicity about staph infections, particularly staph infections caused by methicillin-resistant *Staphylococcus aureus* (MRSA, sometimes called “Mursa”). *Staphylococcus aureus*, often referred to simply as “staph,” are bacteria commonly carried on the skin or in the nose of healthy people. Approximately 25 to 30 percent of the population is colonized (when bacteria are present, but not causing an infection) in the nose with staph bacteria; it can also be carried in the armpit, groin, or genital area. Staph bacteria are one of the most common causes of skin infections in the United States. Most of these skin infections are minor, such as pimples and boils, and can be treated without antibiotics. But staph can also cause serious infections, such as surgical wound infections, bloodstream infections, and pneumonia.

Most infections occur when staph gets inside the body through a break in the skin (cut or scrape). The infected person can spread the staph to someone else, or to objects including clothing, bed linens, towels, soap or furniture. These objects can be a source of infection if they become soiled with wound drainage and a non-infected person comes in contact with them. If there is no break in the skin, contact with infected persons or contaminated objects may result in colonization.

In the past, staph infections have usually been easy to treat with antibiotics. Now, typically over half of the staph causing skin infections are resistant to commonly used antibiotics. Infections often return in spite of apparently successful initial treatment.

MRSA is a type of staph that is resistant to the penicillins, including dicloxacillin or other methicillin-related antibiotics. MRSA infections can range from mild to very serious, even life-threatening. Originally MRSA was confined to hospitals and long-term care settings; the elderly and those with weakened immune systems are especially vulnerable to contracting these MRSA infections, which are called healthcare-associated MRSA (HA-MRSA). Taking antibiotics when they aren't really needed, or not taking antibiotics as directed, is a risk factor for HA-MRSA. More recently, a newer, more virulent strain of MRSA has emerged in the community that causes boils, abscesses, and other soft tissue infections. It is called community-associated MRSA (CA-MRSA, or CAMRSA). *CAMRSA is not linked to previous antibiotic use and may occur in otherwise healthy people of all ages.*

Resources are available on the CCLD Web site at <http://www.cclld.ca.gov/PG532.htm>. These resources include information posted by the California Department of Public Health, the federal Centers for Disease Control and Prevention, and the Los Angeles County Department of Public Health, as well as links to English and Spanish versions of the booklet *Living with MRSA*.

MISINFORMATION MAY BE AN ISSUE FOR LICENSEES

Compliance with Information Release No. 2007-04: Bedridden Residents. CCLD has been receiving complaints about the spreading of misinformation related to Information Release 2007-04. Reportedly, information is being shared that Licensees do not have to comply with the Health and Safety codes and Title 22 regulations identified in the Release. Those licensees who fail to comply with the codes or

regulations identified in Information Release 2007-04 will be cited. Vendors and licensees are encouraged to contact the Administrator Certification Section at (916) 324-3755 and report vendors who are providing misinformation.

Compliance with Long-Term Care Ombudsman Activities: The California State Long-Term Care Ombudsman Program is authorized by the federal Older Americans Act and its State companion, the Older Californians Act. The primary responsibility of the program is to investigate and endeavor to resolve complaints made by, or on behalf of, individual residents in long-term care facilities. These facilities include nursing homes, residential care facilities for the elderly (RCFEs), and assisted living facilities. The Long-Term Care Ombudsman Program investigates elder abuse complaints in long-term care facilities and in RCFEs. All long-term care facilities are required to post, in a conspicuous location, the phone number for the local Ombudsman office and the State CRISISline number **1-800-231-4024**. This CRISISline is available 24 hours a day, seven days a week to receive complaints from residents. For further information related to the California Department of Aging Long-Term Ombudsman Program visit their website at <http://www.aging.ca.gov/html/programs/ombudsman.html>.

RESIDENTIAL CARE STATISTICS

All of the statistics are available online. When you visit the new CCLD home page at <http://www.cclld.ca.gov>, please click on the "Facility Facts" tab at the top of the page. Click on the "Licensing Statistics" link on the center of the page that appears. Then, click on the desired "State Licensed Facilities by Geographical Area". Directories can also be obtained from your local licensing office.

SUMMARY

If you have questions about this Update or suggestions for future topics, please contact Barbara Rooney, Chief of the Technical Assistance and Policy Branch, at (916) 657-2346. Please visit our website at www.cclld.ca.gov to obtain copies of Updates, office locations, provider letters, regulations, or to learn more about licensing services.

Sincerely,

Original Signed by Ben Partington
JO FREDERICK
Deputy Director
Community Care Licensing Division

Enclosures